PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

9903-018

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			23					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			2 3 minus 20≈		* 3			X\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			3 mir	nus 3 =	* O.			X42=		OR	X84=	U
ΜU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	0
* If the difference in column 1 is less than zero, enter "0" in c						olumn 2		TOTAL		OR	TOTAL	804
CLAIMS AS AMENDED - PART II							TOTAL		On	OTHER		
		(Column 1)				(Column 3)) .	SMALL ENTITY			SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	· · · · · · · · · · · · · · · · · · ·	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u>	11	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		ן נ	+140=		OR	+280=	
								TOTAL		,	TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	CLAIM	<u> -</u>	4	X42=		OR	X84=	
<u> </u>	THOTFILL	NATION OF W	OLIFICE DEF	CIADEIAI	CLAIN		-	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***]=	↓	X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN.	CLAIM		ןנ			UR	 	
+140= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE											
1	The "Highest Nun	nber Previously Pa	id For" (Total o	r Independ	ent) is th	e highest numb	er fou	und in the app	propriate box	x in co	lumn 1.	